

DEPARTMENT OF SOCIAL SERVICES

Community Care Licensing Division
Northern California Children's Residential Licensing
Regional Office and Out-of-State Certification Program
2525 Natomas Park Drive, Suite 270
Sacramento, California 95833-2931
(916) 263-4700 (916) 263-4744 (Fax)

**OUT-OF-STATE PRE-CERTIFICATION REVIEW****GIBAULT, INC.**
TERRE HAUTE, INDIANA

FACILITY VISIT DATES: May 16 - May 18, 2005

OUT-OF-STATE CERTIFICATION UNIT (OSCU) STAFF MEMBER:

Carol Lancaster, Associate Governmental Program Analyst

PURPOSE OF VISIT:

Gibault is seeking certification with the State of California, Department of Social Services, Community Care Licensing Division, Out-of-State Certification Unit (CDSS CCL OSCU.) The purpose of the visit was to perform an initial on-site inspection of the facility(ies) and evaluate the program(s) and services offered in an attempt to determine and ensure:

1. The facility is safe and suitable to serve the needs of dependents and wards of the California Juvenile Court.
2. Level of compliance and history with Indiana licensing and other (regulatory) agencies having oversight responsibilities in relation to the facility.
3. Level of compliance and/or the ability to come into compliance with California Licensing Standards in order to certify the facility(ies) to accept and treat California youths.

CALIFORNIA PLACING AGENCIES:

On January 20, 2005, a placement representative of the San Diego County Department of Social Services contacted the CDSS' OSCU, requesting that Gibault be considered for certification. The placement representative reported that, after researching various residential treatment programs for children in Indiana, Gibault was felt best qualified to meet the needs of a dependent under their jurisdiction. Placement in Indiana was reportedly needed as part of the dependent's case plan which included possible future reunification between the dependent and his mother, who had relocated from California to the State of Indiana.

On February 1, 2005, the San Diego County placement representative conducted an on-site evaluation of the facility, documenting and certifying that Gibault met California standards to be considered eligible for certification. Currently, there is one male youth, age 13, placed on June 10, 2005 from San Diego County, California.

FACILITY AND PHYSICAL PLANT OVERVIEW:

The facility the California dependent is placed in is an 8-bed group home operated under Gibault, Inc. Licensed independently from Gibault's 159-bed main campus facility located nearby also in Terre Haute, Indiana. The home operates largely as a satellite facility of the main campus program where clients are typically transitioned in from. The group home's physical structure is that of a single family home dwelling in a residential neighborhood setting near the Indiana State University campus. Like most others in the area, the home was built in the 1930's of Victorian style architecture and is quite large and grand in nature. The home's primary living space comprises of two levels: Downstairs - Entry/dining room, screened porch area utilized largely for private visiting space and telephone use, very large living/family room; bathroom and large remodeled/modernized kitchen with an eating area where meals are traditionally served. Upstairs is comprised of three client bedrooms; a very large bathroom with multiple sinks, commodes and stall showers; and a large staff lounge/office/meeting space with a full attached bathroom. Additionally, the home has a full basement and attic. Both are partially finished but not utilized for client living space. Rather, the basement houses laundry facilities and home supply storage; the attic - additional storage space. Entry into both areas is through locked doors, rendering them inaccessible to clients without the proper key and staff permission and/or direct supervision. The home has a modest sized front lawn with concrete walkway. The backyard is more generously sized and is partially nicely landscaped lawn and flower beds, partially poured and finished concrete patio and basketball facilities.

DELAYED EGRESS / LOCKED PARAMETERS:

There are no locks or delayed egress devices on any doors or windows throughout the home's living space that would prevent a client from leaving the premises should he desire; or jeopardize, hinder or impede safe exit or evacuation. Note: Locked doors or perimeters are a violation of California Licensing Standards. The use of delayed egress requires the facility to obtain a waiver from the OSCU, which is approved under limited circumstances.

TIME OUT ROOMS / QUIET ROOMS:

Facility does not utilize time out or quiet rooms.

FIRE CLEARANCE:

Fire inspections are conducted annually at the group home. The State of Indiana, State Emergency Management Agency, and Department of Fire and Building Services has oversight responsibilities in relation to this area. A copy of the group home's last fire inspection dated October 14, 2004 reflects three violations which were corrected within the time frame allotted:

1. No posted evacuation plan.
2. Required fire exit drills not being conducted monthly and/or documented appropriately.
3. Inadequate fireplace maintenance and accessories
(Copies/Documents comprising evidence of correction provided)

A copy of a fire clearance dated November 23, 2004 for Gibault Group Home, 1141 S. Center Street, Terra Haute, Indiana was received on August 8, 2005 giving clearance to the eight bed facility.

HEALTH DEPARTMENT CLEARANCES:

The group home is a residential dwelling not institutional in nature. A review of Gibault's Health Program, and Nutrition and Food Services Program was conducted on September 30, 2004 by the Indiana Family and Social Services Administration, Division of Family and Children, Bureau of Child Development. A registered nurse with Indiana Social Services, Bureau of Child Development found them to be in substantial compliance with applicable regulations and issued approvals for both through December 31, 2006.

At the time of inspection by this analyst, the facility appeared clean, safe and orderly.

EMERGENCY DISASTER PLAN:

A posted floor plan schematic/drawing with exit routes clearly denoted was observed on a wall in plain view while the facility was toured. General instructions for fire/explosion drill are posted and reviewed monthly by staff. Documentation of evidence that monthly fire drills are being conducted was also provided.

ACCREDITATION:

State of Indiana, Family and Social Services Administration, Division of Family and Children, Bureau of Family Protection and Preservation, Residential Licensing:

- Facility is licensed as an 8-bed Group Home providing long-term care to male clients age 8 to 18.
- An annual visit/review of the facility is conducted and a renewal license is issued on a calendar year basis.

Gibault is also accredited through Council on Accreditation. The accreditation expires September 30, 2008.

A private school on the main Gibault campus serves the educational needs of most Gibault clients. Not all clients of Gibault's 8-bed facility attend the on-campus school; some attend the nearby public schools in the community.

Gibault is a member of the Indiana Association of Residential Child Care which also serves as an internet resource for placement officials. It was through this resource that Gibault was identified and researched by San Diego County.

LICENSING/COMPLAINTS:

Gibault is licensed by the State of Indiana, Family and Social Services Administration, Division of Family and Children, Bureau of Family Protection and Preservation, Residential Licensing. The last two annual licensing inspection reports were acquired and reflect the following information:

Date of Inspection: October 17, 2003 – Five areas of non-compliance cited; four of which involved information or documents not located within a client record; the fifth involved a top sheet lacking from a client's bed. The licensing evaluator commented that the facility was very well maintained and client records were well organized.

Date of Inspection: October 29, 2004 – No non-compliance areas or issues identified. Group home staffs were noted to be very cooperative and accommodating in providing information required for licensing review and facility to be very well maintained.

Complaints: There has been one incident called in to the Vigo County CPS Unit regarding the group home. The allegation was brought to Gibault's attention on February 25, 2005. A client alleged that another client forced him to perform fellatio on him while in the client's restroom. The other client denied that this ever took place, and stated that he was at work at the time the client claimed this occurred. CPS interviewed both clients, and determined that they could not substantiate the allegation. A letter of determination has yet to be received from the State regarding this allegation.

PROGRAM OVERVIEW/PHILOSOPHY:

Gibault was founded in 1921 by the Indiana Knights of Columbus as a "refuge for wayward boys." Since that time, Gibault has undergone many changes and continues to change. The first 12 boys accepted were Catholic boys who were "sowing their wild oats."

The main campus in Terre Haute occupies 60 of the Gibault-owned 347 acres of farm, woodland, streams and ponds. Our residential capacity is 147 children and adolescents between the ages of 8 and 18. The main campus is located three miles south of Terre Haute. Gibault has regional offices in Gary, Indiana, and Evansville, Indiana.

The clients come to Gibault through the Indiana Division of Family & Children, the juvenile courts, Department of Education, other childcare agencies, the Department of Correction, and private placements.

The children and adolescent clients have a variety of issues including abuse, neglect and delinquent behavior. Some have conduct disorders and emotional problems. Gibault has special programs for adolescent sex offenders and for younger children with a history of sexually abusive/reactive behavior.

The on-grounds school is accredited for grades 1 - 12 through Performance Based Accreditation. High

school credits will transfer to the client's home school.
The counseling program offers individual and group therapy.

At admission, an Aftercare Coordinator is assigned to the client and begins to develop a relationship with the client and family. This relationship continues through the client's stay at Gibault and after his or her discharge.

The Recreation Program at Gibault offers a variety of activities and special events. The clients can participate in an active, well-organized intramural program campus wide including community sports. Emphasis is placed on sportsmanship and helping each client experience success in sports and recreational, leisure-time activities. The goal is that this will encourage them to develop individual interests that will last long after leaving Gibault.

The following are some of the sports the clients can participate in while in placement at Gibault.

- Flag Football
- Basketball
- Weightlifting
- Volleyball
- Swimming
- Softball
- Track and Field
- Soccer

In addition to traditional sports, Gibault also encourages the clients to become involved in such activities as fishing, swimming, hiking, camping, computers, board games, drawing, pottery, wood crafts, tennis, physical fitness, and theatre.

Additionally, Gibault provides "special events" to peak interests in new areas and to educate and motivate the clients. This is done through recreational events as well as monthly cultural diversity activities. These events bring the entire campus together to participate.

PROGRAM STATEMENT:

Gibault's residential programs consist of long-term, on-site programs designed to fit the specific needs of the individuals they serve. The Main Campus program consists of Children's and Adolescent's Residential Environment (CARE). The Residential Program also includes the Intensive Sexual Intervention Systems (ISIS), and the Intervention System for Sexually Abusive Children (ISSAC).

In addition to long-term residential programs, Gibault also offers a Transitional Living Program and an Independent Living Program. The Transitional Living Program transitions a client from a rigorously structured residential setting back to the home and community environments. The Independent Living Program serves two groups of clients. The first generally lives on-campus and in the group home before moving into an apartment. Members of the second group are at least 14 years of age and need independent living skills to benefit them when returning to their

families after discharge. Clients can now be referred directly into the Independent Living Program without going through one of the main campus programs.

The Aftercare Program helps guide the client toward success in the family and community setting. At the time of admission, an aftercare coordinator is assigned and begins working with the family and child.

- Family meetings during placement
- Follow-up meetings in the client's home/community at one, three, and six months
- Monthly phone contacts with client and family for up to 12 months after discharge
- Input on prevention planning
- Parenting suggestions and support
- Assistance in monitoring the Prevention Plan

Gibault's Children and Adolescent Residential Environments (CARE) Program is designed to meet the needs of boys and girls between the ages of 8 and 18. The program focuses on five essential areas: the child's physical, educational, emotional, spiritual, and social needs. The importance of the adult/child relationship is at the core of Gibault's treatment philosophy. A consistent and highly-structured environment provides the setting for clients to test new behaviors while working on individualized treatment plans. A team of professionals monitors each client's progress to ensure appropriateness, continuity, and quality of care. The treatment review team consists of clinical, residential, educational, medical, and senior level staff. A clinical psychologist and psychiatrist are available as consultants on all cases. The psychiatrist also monitors all psychotropic medications.

Living units consist of up to 12 clients who are monitored by two full-time direct care staff. Clients are placed in living units based on age, size, maturity, diagnostics, and services needed.

- Maximum of 70 clients in the program
- Expected length of stay - 12 months (depending on needs)
- 1:5 typical staff to client ratio
- 24-hour awake staff

Treatment Focus

- Daily life skills training
- Individualized treatment planning
- Spirituality training
- Individual therapy sessions
- Group therapy as needed
- Academic services
- Recreational programming
- Home visits/passes in accordance with treatment planning
- Family contact through campus visits and phone calls
- Parenting classes and family therapy as appropriate
- Community service projects

Specialized Programming

- Children/adolescents with chemical dependencies

- Adventure-based programming
- Children with abusive backgrounds
- Independent Living programs
- Self-esteem and self-image
- Honor jobs
- Community councils

Gibault offers three distinct Independent Living Programs (ILP) A, B, and C: Clients are identified as potential candidates for independent living services early in placement. Enrollment begins with a formal request from the placing agency and/or referral from Gibault staff.

Clients can be referred directly into the Independent Living Program without going through one of the main campus program.

ILP-A and ILP-C are designed to benefit clients who are nearing their 18th birthday and who will have little or no parental or other support after discharge. ILP-A and ILP-C clients learn to live independently, move into an apartment, and receive continued support and supervision from Independent Living Program staff. These clients generally live on-campus and in the group home before moving into an apartment.

ILP-B is designed for clients at least 14 years of age who need independent living skills to benefit them upon return to their families after discharge.

Phase I

The initial ILP phase, a period of monitoring and tracking typically ends four months after a student is admitted to Gibault. At the end of this period, the ILP coordinator conducts a Client Risk Survey to determine the appropriate Independent Living Program for the client.

Phase II

This is a 16-week workbook phase in which clients learn basic life skills during weekly individual and group sessions. The workbook emphasizes goal setting, personal hygiene, health care, filling out job applications, interviewing, budgeting, apartment hunting, grocery shopping, meal preparation, appropriate leisure activities, transportation, and legal issues.

Clients gain practical experience through weekly group sessions that include presentations and discussions, tours of various manufacturing facilities, employment/career opportunity exploration, professional guest speakers, cooking sessions, mock interviews, and retreats. At the end of the 16-week period, ILP-B clients complete their participation in the Independent Living Program. ILP-A and ILP-C clients' progress to Phase III.

Phase III-A

Under the guidance of Independent Living staff, ILP-A and ILP-C clients secure employment

with the goal of saving \$1,300 for move-out expenses. Independent Living staff makes weekly contacts with the client's employer to identify potential difficulties at work. These issues are addressed in individual counseling, which helps the client learn how to deal effectively with employment issues and to ensure future success in the workforce.

Phase III-B

ILP-A and ILP-C clients prepare budgets, purchase move-out items, prepare weekly leisure time activity schedules, arrange work transportation, and locate suitable apartments. The client may choose to seek other employment because of location or hours needed to maintain an independent lifestyle. There is a reduced per diem during Phase III-B.

ILP-A clients move into an apartment within the Terre Haute community. Independent Living staff provides weekly apartment supervision and daily telephone supervision, unannounced spot checks, and employment spot checks.

ILP-C clients move into an apartment within their home community after a support network has been established. Independent Living staff provides apartment supervision, employment checks, and telephone supervision.

At the end of Phase III-B, the client is discharged and Independent Living staff provides monthly aftercare services for a period of one year. Gibault offers flexible aftercare arrangements to meet individual client, agency, and judicial needs. There is no per diem charged during this phase.

Gibault's Intensive Sexual Intervention Systems (ISIS) program is a specialized treatment unit for adolescent sex offenders who have committed multiple sexual offenses, committed violent and forceful sex offenses, or made no attempts at self control. Some of our clients in this unit have failed in other less intensive placements. Admission is determined after an examination of all available psychological, psychiatric, medical, prior placement, and court records. A detailed account of each sexual offense is also necessary.

- Maximum of 36 adolescent males, ages 12 to 17
- Expected length of stay - 12 to 15 months (depending on treatment needs)
- Self-contained building consisting of three living areas, classrooms, and recreational area
- 24-Hour awake staff
- Staff secure

The therapeutic program is based on the development of appropriate relationships, responsibility, communication and social skills training. In addition, the program addresses morality and has a spiritual component to treatment.

- Daily group sessions dealing with issues of sexuality and sex offenses
- Weekly individual therapy sessions
- Weekly psycho-educational workshops, life skills group, and goal setting groups
- Academic services

- Polygraph testing is available to monitor student progress
- Daily life skills training
- Parenting classes and family therapy as appropriate
- Home visits/passes in accordance with treatment planning
- Prevention planning

Gibault's Intensive System for Sexually Abusive Children (ISSAC) program is a specialized treatment unit for males who are displaying sexually abusive behavior. A child referred to this program should be between the age of 8 and 12 with a history of behavior that would label him a sex offender should the behavior continue. The child will more than likely have a history of sexual molestation of other children. A detailed history of the child's sexual behavior will be necessary in addition to the information required in our admission criteria.

- Maximum of 12 males, ages 8 to 12
- Expected length of stay - 12 to 15 months (depending on treatment needs)
- Home-like environment, group home setting
- 24 hour awake staff
- Staff secure
- 1:4 staff to client ratio

The therapeutic program is based on the development of appropriate relationships, responsibility, communication, and social skills training. In addition, the program addresses morality and has a spiritual component to treatment. We also focus on "good touch/bad touch" and boundary setting. The direct care staff encourages the children to take responsibility for the community in which they live and meet regularly as a community council.

- Daily group sessions which focus on relationship development and past abuse issues
- Individual therapy sessions
- Weekly psycho-educational group meetings
- Life skills training
- Academic services
- Parenting classes
- Home visits/passes in accordance with treatment planning
- Prevention planning
- Family therapy with focus on any victims that may remain in the home or neighborhood
- Play therapy and experiential groups.

Transitional Living, or the Transition Program, is exactly what its name implies. It is a program that transitions a client from a rigorously structured residential setting back to the home and community environments. Transitional Living is an integral component of Gibault's overall philosophy and therapeutic intervention program.

By design, the Transition Program requires less direct supervision of the clients. Although supervision is less direct, it is "active" supervision. This means that staff is always acutely aware of a client's location and the activity in which the client is involved.

Referrals to the Transition Program are made by each client's Unit Treatment Team. Referrals are based on:

- Academic need
- Behavioral progress
- Social skill development

Clients who have received the maximum benefit from our main campus CARE programs are referred to Transition to further their personal growth. Clients from the ISIS units are also referred to Transition once they have completed their therapeutic work in the program.

Placing agencies can refer a client directly into Gibault's Group Home. Each referral will be considered on an individual basis.

The Transition Program has two separate living units.

- A dormitory-type residence on our main campus that houses a maximum of 13 clients. Clients who are potentially more volatile are generally placed into this unit due to the proximity of support staff.
- A Group Home, located within the Terre Haute city limits, houses the less volatile Transition clients and has a maximum capacity of 8 clients. Staff at the Group Home consists of male and female house parents and relief staff. Meals are prepared by the house parents. Additional freedom and privileges are afforded to these clients because of their stability and maturation level.

Educational Opportunities such as:

- Public schools in the Terre Haute area
- Indiana Vocational State College (Ivy Tech)
- Indiana State University
- Indiana University (correspondence courses)
- Vincennes University (correspondence courses)
- GED (General Education Development)

The Transitional Living Program differs from the main campus CARE Program in that clients have more privileges and personal freedom to pursue their social and educational interests such as:

- Daily phone privileges
- Off-campus recreation
- Participation in public school functions and athletic programs
- A less-structured group living environment
- Permission to wear personal jewelry, watches, and carry wallets.

Transitional Living is viewed as the final phase in a client's placement. The client who successfully completes the semester is usually discharged at its conclusion. With this in mind, clients and families are encouraged to increase their interactions with one another during this phase of treatment. Home visits/passes are more frequent or longer in duration. Clients have daily access to public telephones and are encouraged to call family members on a regular basis. To further assist with the reunification

process, the Transitional Living Program Unit Treatment Teams are also flexible with regard to extended or overnight campus visits with the family.

EMERGENCY INTERVENTION PLAN:

Gibault staff is trained in Therapeutic Crisis Intervention (TCI). It is a well known method within the group home industry that was created by the Residential Child Care Project at Cornell University. Newly hired staff goes through a 24-hour training on TCI principles during their New Hire Orientation (first week of employment). This includes behavior management techniques and physical restraint training. Direct Care staff is trained in the following Behavior Management Techniques to help them structure their interactions with the children to deescalate behaviors and assist in regaining control:

- Structuring the Environment
- Planned Ignoring
- Prompting
- Hypodermic Affection
- Hurdle Help
- Non-Verbal Intervention
- Proximity Control
- Touch Control
- Redirecting
- Directive Statement
- Time-out

TCI training is provided by in-house staff trained as TCI trainers. Staff is required to attend refresher training every six months.

Gibault presented a well written Crisis Intervention Policy created in 2001; and last updated January 6, 2004. Physical intervention is discouraged and used only when a client is a danger to himself/herself or others, and to protect individuals from harming themselves or others. Personnel are trained to use the least restrictive, safest, and most effective method. Physical restraint is initiated only if all less restrictive measures have been proven ineffective. Their belief is that physical intervention, when needed serves two purposes: 1) To help children regain self-control and 2) To teach the child a better way of coping with difficult situations and uncomfortable painful feelings.

Issue: The California policy for continuation of any restraint/holding requires approval of an administrator or designee after 15 minutes. This issue is addressed in the Plan of Correction.

The Crisis Intervention Episode Review Committee reviews each crisis intervention episode the following business day after the crisis episode to determine whether it was a justified or a questionable restraint.

Upon staff and client interview regarding use of physical restraints within the past year, it was estimated that the occurrence was approximately two to three times within the past year or two.

The following are not allowed at Gibault:

- Degrading punishment, verbal and emotional abuse
- Double discipline
- Corporal or physical abuse including the use of physical restraint as a form of punishment
- Chemical restraint
- Mechanical restraint
- Forced physical exercise solely for the purpose of eliminating behavior
- Punitive work assignments
- Group discipline for one person's behavior
- Extended isolation
- Denial of family visits
- Deprivation of personal rights
- Painful aversive stimuli
- Denial of social or recreational activities for more than 7 days
- Denial of mental health, medical or educational services
- Denial of breakfast, lunch or dinner

RUNAWAY PLAN:

Gibault maintains a Runaway Plan including intervention plan, line of supervision and reporting and communication protocols.

Issue: Runaway Plan shall include an individualized plan for each California child which will address the child's risk factors if he/she ran away from the facility. Documentation to use any method of restraint for runaways must be approved through the child's authorized representative and or guardian and incorporated into the child's treatment plan. This issue is addressed in the Plan of Correction.

ADMISSIONS/INTAKE PROCEEDURE:

The admissions process formally begins when the Admissions Department received a referral packet from a placing agency for review. The decision for acceptance or denial of placement is made by the Admission Committee personnel. Possible decisions on a referral may include rejection, requirement of a pre-placement interview, and acceptance may include a trial period that may result in Administrative discharge when the client is "at risk".

Admission considerations:

- Age
- I.Q scores

- Educational status
- Intensity and history of inappropriate behaviors
- Aggressive behavior
- Dysfunctional and chaotic family background
- Runaway risk
- Substance abuse
- Psychotropic medications
- Current diagnosis
- Additional considerations of sexual behavior

At the time of admission, therapists will complete the Clinical Intake/Initial Assessment that includes:

- Client Information
- Presenting Problem
- Legal History
- Treatment History
- Family and Social History
- Personal History
- Personal Strengths
- Medical History
- Substance Abuse History
- Family Involvement
- Mental Status
- Clinical Summary

This information will drive the therapist's initial treatment plan which must be completed within two weeks of the date of admission. Subsequently, the full clinical treatment plan will be completed within 30 days of the date of admission.

DRUG TESTING AND CLIENT SEARCHES:

Gibault conducts searches on clients when the client is believed to be in possession of contraband items or may have opportunity to obtain contraband. Listed below are a few circumstances that may require searches:

- Upon admission
- Upon return from a court hearing
- Upon return from a special outing
- Upon return from a home furlough
- Upon return from a campus visit
- Upon return from AWOL

Residential Services Supervisors with assistance from direct care staff are responsible for conducting searches. Appropriate measures are taken to ensure privacy. Searches are conducted by same sex staff. Search and contraband items are documented.

Additionally, Gibault performs drug screening. A request for drug screening document providing authorization to Gibault is completed upon admission by the authorized representative.

California recognizes the potential need to conduct drug tests and perform searches on clients, in the interest of advancing their treatment plan; however, California requires that these practices be approved, in writing, by the clients authorized representative or via court order.

Issue: A request for client search document providing authorization to Gibault must be completed by the authorized representative or via court order. This issue is addressed in the Plan of Correction.

CLIENT PERSONAL RIGHTS:

Upon admission, each child and his/her authorized representative is informed of his/her rights and signs the document. The following rights at Gibault include food, shelter, medical and dental care; adequate clothing; protection against abuse, neglect, exploitation, and discrimination; freedom from unnecessary or excessive medication; academic instruction; privacy; religious worship; treatment program; free expression of thought; opportunity to view their clinical record; progress report; campus visit with parents or guardians approved by the placing agency; an evaluation with respect to placement in the Transition Program and/or discharge recommendation; possession of personal items not excluded in the Program Handbook – Contraband List; and refusing treatment.

Privileges are to have regularly scheduled home furloughs and periodically exposed to less restrictive environment.

Issue: Client Personal Rights documents were not observed to be posted in each living unit. Client Personal Rights document shall be posted in each living unit. This issue is addressed in the Plan of Correction.

CLIENT GRIEVANCE PROCEDURES:

A client grievance can be divided into two main categories. The first involves complaints or allegations made by a client against a staff in terms of basic procedures or actions which the client felt were not proper and may result in the client feeling he was not treated “fairly” in regard to how a situation was handled. This is called a “Regular Grievance”.

The second involves a client lodging a complaint against a staff which either in the client's own words or through his description of the actions of a staff, or lack of action, constitutes neglect

(physical or emotional) or abuse (emotional, physical, or sexual) of a client. This is called a "Special Grievance".

For "Regular Grievance", the client may deal it directly with the staff person involved. If this approach is uncomfortable for the client, he/she may report it to the supervisory level staff person. Client will complete a written documentation of the incident and given to the Director of Compliance for investigation and action.

"Special Grievance" is referred immediately to the supervisory level staff and is reported to the Director of Compliance. A full investigation is conducted. If there is a basis for an abuse or neglect allegation, he/she will inform the Director. The Director, in turn will report to the "State Abuse Hotline" as in incident possibly involving "Institutional Abuse" which will be investigated by the State.

The procedures include a method for appeal, timely resolution and documentation.

MEDICAL, DENTAL, AND NUTRITIONAL SERVICES:

Most medical and dental services to clients are rendered at an in-house clinic located on the main campus. The clinic appears to be appropriately staffed with credentialed nursing staff and a contracted physician. Additionally, a medical physician, a psychiatrist is employed by the agency for assessment and psychotropic medication management and treatment purposes.

The clinic appeared to be well managed, equipped and able to meet the general needs and demands of the population. Community care resources are available for those client needs that the clinic is unable to meet.

Medication records, as well as dispensary and storage appeared to be well managed and safe. Nutritional needs are met at the group home through organized menu planning, shopping and meal preparation. Meals are served and eaten as family style. Special dietary needs are available upon assessment and planning of the facility nutritionist.

TREATMENT: NEEDS AND SERVICES (COUNSELING, GROUPS, THERAPY ETC):

The Clinical Services Department at Gibault is comprised of the Director of Clinical Services, the Supervisor of Clinical Services and professional therapists, who are either licensed or seeking licensure through the state of Indiana. Typically, therapists hold master's degrees in the fields of clinical social work, mental health counseling, and/or marriage and family therapy. One licensed therapist is also a certified alcohol and drug counselor.

At Gibault, the child and adolescent psychiatrist, clinical psychologist, and licensed (or license eligible) therapists provide clinical services within the context of the residential programming.

When a client is admitted, the primary therapist conducts a thorough clinical assessment with

input from the newly admitted client, the parents/guardians, and the placing agency. Their participation in the assessment is expected and vital for problem identification and prioritization of goals, as well as diagnosis. The resulting identified areas of distress for the client and the family, as well as the client's diagnosis, guide the course of therapy delivered during placement.

Each client's therapist participates in a weekly clinical staffing with the clinical psychologist and other therapists on the team. The staffing provides opportunities for the exchange of therapeutic strategies, diagnostic updates, and treatment plan revisions. Supervision is provided for master's level therapists who are completing licensure eligibility requirements. Whenever possible, a primary therapist who has demonstrated expertise and effectiveness in treating the client's specific problems is assigned.

Types of Psychotherapy

Individual Therapy is by far the most frequent modality of clinical intervention across all residential programs. Clients participate in individual therapy at least once per week. However, on-going clinical assessments of the client may indicate a need for more frequent sessions, especially if there is increased distress from internal or external stressors. Close communication with residential, educational, and support services staff assists therapists in adjusting the frequency of individual therapy to meet the needs of the client.

Group Therapy is the predominant means of clinical services with our Intensive Sexual Intervention Systems (ISIS) program and our Intensive System for Sexually Abusive Children (ISSAC) program. Group therapy may be specific to a program, such as ISIS or ISSAC, which deals primarily with inappropriate sexual behaviors, sexual offenses, or diagnosed paraphilias. Some group therapy, however, is specific to a particular problem such as anger management/conflict resolution, sexual abuse, physical abuse, or chemical dependency. In group therapy, clients learn the skills necessary to support and confront one another in the group setting as efforts are made to change self-defeating patterns of thoughts, feelings, and behavior. Support groups are also offered to parents/guardians of ISIS clients, and parenting skills groups are available to all clients' parents.

Family Therapy is recommended for most clients, and whenever possible, is offered through the client's primary therapist. However, geographical distance and parents'/guardians' work responsibilities sometimes prohibit the delivery of family therapy at Gibault. Under these circumstances, family therapy might be more readily available in the client's community during a home visit/pass. With the appropriate release of information, the client's primary therapist at Gibault will consult with the family therapist in the community to provide coordination of services.

Whenever possible, Gibault works closely with each client's family. Services to families include:

- Family therapy with one of Gibault's master's level therapists
- Transportation for home visits/passes

- Regular Parenting Skills classes
- An array of visitation opportunities including:
 - On-campus supervised visitation
 - On-campus unsupervised visitation
 - Local off-campus visitation
- Home visits from Aftercare Coordinators

EDUCATION / VOCATION SERVICES:

Gibault is accredited by the Indiana Department of Education through Performance-Based Accreditation and the North Central Association of Colleges and Schools. The on-grounds school operates a year-round education program for students in grades 1 through 12. During the regular school year, students attend classes on an eight-period schedule.

Remedial and Basic Classes

- Reading/Literature
- Mathematics
- Science
- History
- Language Arts/English

Elective Courses

- Computers
- Industrial Technology
- Art
- Music
- Drama
- Driver's Education
- Developmental PE
- Health
- Media

The school also operates a nine-week, half-day summer school program in which high school students earn two additional credits in a variety of classes. Students entering the 10th grade focus on skills covered in the Graduation Examination. Students are placed in English and mathematics classes to prepare for the test. Middle school students focus on basic skills to prepare them for the Fall ISTEP examination.

Gibault uses a unique approach to educational program design. Students are placed into classes based on their ability and educational need rather than age or grade. Upon admission, each student takes achievement tests administered by the school psychologist. Students on main campus are placed in one of the four academic ability levels for middle school or one of the six academic ability levels for high school. There are four ability levels in the Intensive Sexual Intervention Systems (ISIS) unit. Classroom teachers recommend level changes at the end of each semester based on the student's performance and need. Class sizes range from 3

to 15 students in each of the levels. The number of students in the lower levels is kept small to provide greater individual assistance. Semester goals are developed for the students by each of their classroom teachers.

All special education students are provided case conferences to review past Individualized Education Plans, modify the educational program, make recommendations for additional services, and establish goals for the academic year. Both the parents and placing agency representatives are invited to attend the conference along with the student's counselor and representatives from the Education staff. Telephone conferences are available to agencies and parents.

Student academic progress is monitored frequently. The school uses a six-week grading period and also issues three-week progress reports. Students receive a special scholastic treat (S-treat) for a "B" average or above in their classes. Students can earn additional treats and rewards by earning S-treat on a regular basis. At the end of each semester, students receive awards for highest grade point average in each ability level and other academic achievements such as most improved student.

Behavior, attitude, and effort are key to student success in the educational program. The school uses an assertive discipline program to redirect negative student behavior and attitude. The school also recognizes student effort within the grading system by awarding points for good effort, behavior, and attitude. These points are then used to purchase items in the canteen.

Gibault is capable of awarding high school diplomas to students who meet all credit requirements from the Indiana Department of Education.

Gibault also offers the General Educational Development (GED) Program, which is coordinated through the Transitional Living Department. Students are selected for the GED program based on age, academic ability, and individual scholastic needs. After consultation with teachers, parents, and the placing agency, a student may be enrolled in the program. Over a 16-week period, these students receive tutoring and instruction designed specifically to prepare them for the State GED exam.

Additional academic opportunities include public school enrollment within the Vigo County School System, enrollment at Ivy Tech State College or Indiana State University, and college correspondence course work. These programs are coordinated by the Transitional Living/Independent Living departments.

BEHAVIOR MODIFICATION SYSTEM:

No level or point system.

CRIMINAL RECORD CLEARANCES / SUBSEQUENT ARREST:

At the time of application for employment, a candidate must complete a Criminal History Affidavit and have it notarized in accordance with the Department of Family and Children's Services regulations. A criminal records check will be made through the Indiana State Police. Gibault will also consult with the State of Indiana Sexual Offender Registry to determine if an applicant has ever been convicted of a crime, which would be considered sexual in nature. Gibault will not offer employment to any individuals convicted of a sexual offender crime and/or listed in the Registry. Additionally, Indiana Law prohibits the employment, or accepting volunteer of an individual who has been arrested for, or convicted of any of the offenses listed on the Criminal History Affidavit.

STAFF ORIENTATION AND TRAINING:

Training required within 60 days from date of hire:

- Orientation (48 hours) includes topics such as Emergency and Risk Management Protocol; Corporate Compliance Plan; Continuum of Care; Gibault's Relationship with Community Resources; Therapeutic Issues – Individuals and Families; Basic Principle in Quality Child Care; Licensing and Legal Regulations; Nutrition and Sanitation; Personnel Policy; Job Specification, etc.
- Preventive Disease Training Program - Updated annually
- Therapeutic Crisis Intervention – 24 hours initially and refresher course bi-annually
- Community First Aid and Safety
- Infant and Child CPR
- On-going training to include special training programs, in-service training, and external training programs, such as conferences and seminars
- Topics may include Treatment Plans, Psychotropic Medications, Chemical Restraints, Reducing the Use of Restraints and Seclusion, Discharges and Transition, CPS Protocol, Emergency/Risk Management Protocol, etc.

DOCUMENTATION AND REPORTING REQUIREMENTS:

Per Family Code Section 7911.1(a), certified out-of-state group homes are required to comply with reporting requirements pursuant to the California Code of Regulations, Title 22, Sections 80061 and 84061, by providing copies of incident reporting. Gibault complies with these requirements and is applicable to all clients residing at the group home.

SCOPE OF CERTIFICATION REVIEW:

Assessment of critical operation issues including programming, intake and discharge procedures, discipline policy, emergency intervention techniques, medical procedures, staff and client file review, facility file review, staff interviews, observation of program and daily activities, criminal record review, personal rights, food services, staff trainings, emergency disaster plan, fire clearance, and all issues pertaining to physical plant.

OUT-OF-STATE CERTIFICATION FINDINGS / PLAN OR CORRECTION:

Develop a Plan of Correction (POC) and implementation process that clearly responds to the issues of the Out-of-State Certification review for Gibault, Inc. The POC shall include but not necessarily limited to the following elements:

- Under the Emergency Intervention Plan section, where the use of physical restraint is limited to 15 minutes for children aged nine and younger, and 30 minutes for person aged ten and older; address Gibault's policy and procedure on physical restraints complying to California's standards. (Attachment "Group Home Emergency Intervention" pages 6-12 provides guideline)
- Runaway Plan shall include an individualized plan for each California child which will address the child's risk factors if he/she ran away from the facility. Documentation to use any method of restraint for runaways must be approved through the child's authorized representative and or guardian and incorporated into the child's treatment plan. (Attachment "Group Home Emergency Intervention" page 16 provides guideline)
- California recognizes the potential need to conduct drug tests and perform searches on clients, in the interest of advancing their treatment plan; however, California requires that these practices be approved, in writing, by the clients authorized representative or via court order. A request for client search document providing authorization to Gibault must be completed by the authorized representative or via court order.
- Client Personal Rights documents were not observed to be posted in each living unit. Client Personal Rights document shall be posted in each living unit.

CERTIFICATION DECISION:

Gibault is offered an opportunity to provide a Plan of Correction (POC). The Certification decision will be made following review of the submitted POC. Please submit the POC for the above issues addressed by September 30, 2005.